

community activism to all who know her. I join the entire community in congratulating Ms. Lee for winning this prestigious award and in thanking her for her efforts on behalf of our community and its citizens.

TRIBUTE TO ROBERT T. ACKER

HON. DUNCAN HUNTER

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 21, 1996

Mr. HUNTER. Mr. Speaker, I rise today to recognize the extraordinary service and dedication of a constituent in my district, Mr. Robert T. Acker of El Cajon, CA. Robert is a devoted member of this community serving the city of El Cajon for the past 30 years, 14 of these as city manager. He is soon retiring and I would like to take a moment to commend his dedicated service in local government and community programs.

A Holtville native, Robert is a graduate of San Diego State University [SDSU] with a master's degree in economics. After service in the U.S. Army, he went to work as an appraiser for the San Diego County Assessor's Office and in 1966, was hired as an administrative analyst for the city of El Cajon where he was promoted to city manager in 1982.

During his tenure as city manager, Robert has enthusiastically participated in dedications of public buildings including the El Cajon Fire Headquarters, the El Cajon Community Center, and the El Cajon Library. He is spirited and has always strongly advocated city improvements and prosperity.

Robert's involvement and accomplishments extend well beyond serving as the city manager of El Cajon. Aside from working as an assistant professor in public administration at SDSU, he also served as a member of the San Diego Transit Corporation Board of Directors, the City/County Managers Association, the Ducks Unlimited Steering Committee, the International City Management Association, the National Rifle Association, and the El Cajon Lions Club. This involvement in community service has assisted in raising funds for projects such as Canine Companions, El Cajon Boys and Girls Club, San Diego Service for the Blind, Home of Guiding Hands, Drug Awareness Resistance Education, Tijuana Orphanage Support, and Christmas Baskets for Needy Families.

Robert is a symbol of commitment and dedication to his fellow citizens and community. He has pledged a great share of his life to the service of others and he has surely made El Cajon a better place to live. Today, let us honor him for his unwavering contributions. I hope retirement can afford him the enjoyment of his hobbies hunting, fishing, gun collecting, and spending time with his wife and daughter, Susan and Kathryn. Mr. Robert Acker is well-deserving and I wish him great happiness in his future endeavors.

WHY WE NEED THE KASSEBAUM-KENNEDY GROUP-TO-INDIVIDUAL CONVERSION PROVISIONS

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, March 21, 1996

Mr. STARK. Mr. Speaker, over the years, I've received many letters from around the Nation on the need for national health insurance reform.

Many of these writers would be helped by a provision in Kassebaum-Kennedy: the right to buy an individual policy after leaving a group policy, and not having one's pre-existing conditions excluded permanently. Many insurance companies oppose this provision but passing this law is the least we can do for our constituents.

The following letters make the case:

DEAR MR. CONGRESSMAN, I am a 50-year-old male who was recently laid off due to a corporate merger. I have continued Cobra health insurance program through my former employer, for myself and wife, at my own expense of \$281 per month.

I have accepted a position with a small company and applied for the medical insurance offered by them with John Alden Life Ins. Co. This has been in process for several weeks, and I have now received this enclosed letter refusing us coverage due to my "condition".

I have had a seizure disorder since my late teens which is totally controlled by medication and has not incapacitated me at any time. I am periodically checked by the doctor and lead a perfectly normal and active life.

This is the first time during 30 plus years in the work force with previous employers that I have ever been refused medical coverage. It imposes an extreme financial burden on us, and the ultimate horror is that we could be wiped out should there be any medical crisis which can happen to anyone at anytime.

What, Mr. Congressman, can be done about something like this, and where do we turn when suddenly judged uninsurable?

A MAN FROM CALIFORNIA.

MR. STARK: As a retired employee of Southeast Banking Corporation, my medical coverage ceased on September 20.

First, I believe it is outrageous that retired employees be advised after the fact that coverage was terminated, and not given the opportunity to seek alternative coverage in a timely manner.

Further, since Southeast was self insured and Metropolitan was merely the administrator, there is no policy to which we can convert.

Furthermore, I am advised by Metropolitan that due to a pre-existing condition (Parkinson's) of my wife, they have no coverage available for her and that they doubt if any insurer in the country would write coverage. And the Florida Insurance Commissioners Office claims that they have no jurisdiction over self-insured groups, plus enrollment in the State assigned risk program has been closed.

So, the long and the short of it is, we are out on the street. What am I to do?

DEAR CONGRESSMAN STARK, I am sure that you would be interested and concerned about what has recently happened to me as an older, retired adult, in relation to an extreme inequity in the health care system. What happened to me is as follows.

I retired as a result of a heart problem in 1989, and in 1990, I had a bypass surgery. I was covered by Kaiser Permanente Health Plan at the time, and I have been covered by them for the past 32 years. I was still carried by the engineering company from which I retired, but without my knowledge, my company discontinued the Kaiser health plan as of June, 1992. Not having been notified by either my ex-employer nor Kaiser, I continued to use the medical services, and even had an elective hernia operation in June. On June 26th, Kaiser sent a letter notifying me that I was no longer covered. Upon contacting them by phone, I was told of the circumstances, and was advised to apply under an individual membership. I complied and immediately applied, but I was rejected quickly by the Medical Review Board at Kaiser citing the reason as "arteriosclerotic heart disease".

MAN FROM CALIFORNIA.

DEAR CONGRESSMAN PETE STARK, I'm 13 years old and, a resident of San Leandro, California. When I was 10 months old my pulmonary artery had to be opened. At that time I had Health insurance. Unfortunately, after I recovered from the open heart surgery, my families insurance dropped my coverage. Due to the fact that my parents are self-employed, I have been without Health insurance for roughly 12 years.

Thank you for your time.

DEBORAH FROM HAYWARD, CALIF.

DEAR REP. STARK: My husband and I have been what we would call middle class for all our married life. We both held down good paying jobs and worked hard all our life. Two and one-half years ago I had three heart attacks in one month. I could no longer work for quite some time, having spent many weeks in the hospital. My husband has been treated for hypertension for some years, and it became obvious he must sell our business because of this and his worry over me, plus the fact that I could no longer work with him at our business. This was an unprofitable sale, business was poor and we had to share the proceeds with a partner in our business. He applied for and was paid Unemployment Comp. for several months until he obtained work. Since he returned to the workplace at age 59, it was very difficult to secure a well paying position, but he is a hard worker and he can provide for our needs at this time, except for health insurance coverage. I have returned to work part time only, as my health does not permit me full time employment. After paying into Unemployment for the eight (8) years we were in business, he has now been notified he was not eligible to collect unemployment at all, because the Unemployment Board decided he did not have good cause to sell the business and therefore, demand a repayment of \$3,000 he was paid. We are appealing this ruling, but I have gotten far afield of my subject I am afraid . . .

As we had group health coverage for both of us and our employees in our business, we have kept up that coverage until this month. We have been covered by Prudential Ins. for approximately 10 years. Each six (6) months the premium was raised 15 percent until this month it went to \$576 per month. We have been paying this premium each month from our savings (from the sale of the business and it was intended to be for our retirement). But now it has been depleted and we no longer can pay for the coverage. We have been unsuccessful in locating other coverage because of the two year wait for "pre-existing" conditions, I for my heart problems, he for hypertension. Also, not being in a "group" the cost was as much as we were paying Prudential for a group coverage.